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Feb 27 1997 8:00am
Secretary of State



PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L92625 (7)
1. Corporation Name
SAWGRASS FAN CLUB, INC.



Principal Place of Business: 12801 W SUNRISE BLVD 877 SUNRISE FL 33323 US
Mailing Address: ATTN: TAX DEPARTMENT 7880 BENT BRANCH DRIVE, SUITE 100 IRVING TX 75063-6046

3. Date Incorporated or Qualified: 08/13/1990
3a. Date of Last Report: 02/20/1996
4. FEI Number: 04-3096235
5. Certificate of Status Desired: [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [] Yes [] No

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30 Country

9. Name and Address of Current Registered Agent
UNITED STATES CORPORATION COMPANY
1201 HAYES STREET #105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE: D NAME: BRENNAN, MICHAEL R STREET ADDRESS: 1 THEALL ROAD CITY - ST - ZIP: RYE NY	<input checked="" type="checkbox"/> DELETE
TITLE: VPT NAME: ROACH, DONALD V. STREET ADDRESS: 3940 PIPESTONE ROAD CITY - ST - ZIP: DALLAS TX	<input checked="" type="checkbox"/> DELETE
TITLE: S NAME: MAYER, MARK W STREET ADDRESS: 3940 PIPESTONE RD CITY - ST - ZIP: DALLAS TX	<input type="checkbox"/> DELETE
TITLE: D NAME: PARKS, RALPH T STREET ADDRESS: 3940 PIPESTONE RD CITY - ST - ZIP: DALLAS TX	<input type="checkbox"/> DELETE
TITLE: P NAME: PARKS, RALPH T STREET ADDRESS: 3940 PIPESTONE ROAD CITY - ST - ZIP: DALLAS TX	<input checked="" type="checkbox"/> DELETE
TITLE: VP NAME: ALBERT, CHARLES M STREET ADDRESS: 3940 PIPESTONE RD CITY - ST - ZIP: DALLAS TX	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	7880 BENT BRANCH DR. #100
3.4 CITY - ST - ZIP	IRVING, TX 75063
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D / P
4.3 STREET ADDRESS	7880 BENT BRANCH DR. #100
4.4 CITY - ST - ZIP	IRVING, TX 75063
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	HOMER W. GREER
5.3 STREET ADDRESS	7890 BENT BRANCH DR. #100
5.4 CITY - ST - ZIP	IRVING, TX 75063
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	VP / D
6.3 STREET ADDRESS	7880 BENT BRANCH DR. #100
6.4 CITY - ST - ZIP	IRVING, TX 75063

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (not changed) or on an attachment with an address.

SIGNATURE: [Signature] MARK W. MAYER 2-17-97 972-501-5040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)